

ISSUE CUP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Weg</i>		9/18/99
O.I.P.E. CLASSIFIER		75	9/18/99
FORMALITY REVIEW	LH	60105	9-17-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	5	12	9/13/99
2	6	13	9/13/99
3	7	14	9/13/99
4	8	15	9/13/99
5	9	16	9/13/99
6	10	17	9/13/99
7	11	18	9/13/99
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13	17	24	9/13/99
14	18	25	9/13/99
15	19	26	9/13/99
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18	22	29	9/13/99
19	23	30	9/13/99
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32	36	43	9/13/99
33	37	44	9/13/99
34	38	45	9/13/99
35	39	46	9/13/99
36	40	47	9/13/99
37	41	48	9/13/99
38	42	49	9/13/99
39	43	50	9/13/99

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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